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LIMBU STRICE HORKBURGOV CO.	at a		
United States Bankruptcy Cou Northern District of Illinois		FILED	
	UNII No	ED STATES BANKRUPTCY COURT IRTHERN DISTRICT OF ILLINOIS	
Case number (if known):	Chapter you are filing under ✓ Chapter 7 ☐ Chapter 11 ☐ Chapter 12		
Official Form 101			
Voluntary Pe	tition for Individuals F	iling for Bankruptcy	12/1
the answer would be yes if eith Debtor 2 to distinguish betwee same person must be Debtor : Be as complete and accurate a	ther debtor owns a car. When information from the debtor owns a car. When information is needed the spouses must refer in all of the forms. It is possible. If two married people are filing together to this form. On the	narried couple may file a bankruptcy case together—calle both debtors. For example, if a form asks, "Do you own a d about the spouses separately, the form uses Debtor 1 apport information as Debtor 1 and the other as Debtor 2." er, both are equally responsible for supplying correct e top of any additional pages, write your name and case	car," and The
Part 1: Identify Yourself			
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)	٠
1. Your full name		(openior of the control of the contr	,.
Write the name that is on you government-issued picture	NICOLE		
identification (for example, your driver's license or	First name	First name	·
passport).	Middle name HARRIS	Middle name	
Bring your picture identification to your meeting with the trustee.	Last name	Last name	
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
. All other names you	aktivitetakun terretakun terretakun perintung dalam perintut ang aktivit ang aktivitetah dalam perintut ang pa		erritaren errana
2. All other names you have used in the last 8 years	First name	то постоя на политирования на политиров	er de merete este.
have used in the last 8 years Include your married or	First name Middle name	First name Middle name	
have used in the last 8 years			
have used in the last 8 years Include your married or	Middle name	Middle name	
have used in the last 8 years Include your married or	Middle name Last name	Middle name Last name	
have used in the last 8 years Include your married or	Middle name Last name First name	Middle name Last name First name	
years Include your married or	Middle name Last name First name Middle name	Middle name Last name First name Middle name	
have used in the last 8 years Include your married or maiden names. Only the last 4 digits of	Middle name Last name Middle name Last name	Middle name Last name First name Middle name	month month and
have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security	Middle name Last name Middle name Last name xxx - xx - 3 0 1 3	Middle name Last name First name Middle name	
have used in the last 8 years Include your married or maiden names. Only the last 4 digits of	Middle name Last name Middle name Last name	Middle name First name Middle name Last name Last name	man August and August

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Debtor 1 NICOLE HA	ARRIS	•
First Name Middl	le Name Last Name	Case number (#known)
metteraktionen kannet betreete kretteren ander scharen en er et en tree tree helt kann stangs med kloref segt	tra and three processing distributions or proceedings and an artifaction of the contract of th	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
s. Where you live		If Debtor 2 lives at a different address:
	8112 S LOOMIS	
	Number Street	Number Street
	CHICAGO IL 60620	
	COOK State ZIP Code	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's malling address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
relative and the second of the		

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Debtor 1 NICOLE HAP First Name Middle N	RRIS	Last N	ame		Case number	(if known)	
Part 2: Tell the Court Abo	ut You	Bankr	uptcy Case				
7. The chapter of the Bankruptcy Code you	Check for Ba	one. (Fo	or a brief description of (Form 2010)). Also, go	each, see No to the top of	tice Required by a	11 U.S.C. § 342(b) for Individuals Filing the appropriate box	
are choosing to file under	for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7						
	Chapter 11						
	☐ CH	apter 1	2				
	_	apter 1					
8. How you will pay the fee	yor sul wit I no Ap, I re By less pay	ar court urself, y pmitting h a pre- eed to p polication quest t law, a ju s than 1	ou may pay with cast your payment on you printed address. Day the fee in install of for Individuals to Path hat my fee be waive udge may, but is not 150% of the official po	th how you in the cashier's for behalf, you ments. If you may the Filing and (You may required to, everty line the coose the coose the cashier's for the coose the coo	may pay. Typica check, or money our attorney may but choose this of a Fee in Installmonth of the choice of the cho	heck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is a pay with a credit card or check ption, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is aur family size and you are unable to must fill out the Application to Have the with your petition.	
 Have you filed for bankruptcy within the last 8 years? 	☑ No ☐ Yes	District		When		Second	
, , , , , , , , , , , , , , , , , , ,				· · · · · · · · · · · · · · · · · · ·	MM / DD / YYYY	Case number	
		District		When	MM / DD / NOO(Case number	
		District		When			
				1111011	MM / DD / YYYY	Case number	
	1 1				e e e e e e e e e e e e e e e e e e e	ere de la companya del companya de la companya del companya de la	
10. Are any bankruptcy cases pending or being	☑ No						
filed by a spouse who is	Yes.	Debtor				Relationship to you	
not filing this case with you, or by a business partner, or by an affiliate?					MM / DD / YYYY	Case number, if known	
		Debtor				Relationship to you	
				When		Case number, if known	
					MM / DD / YYYY	The state of the s	
11. Do you rent your residence?	☐ No. ☑ Yes.	Go to lin Has you resident	ır landlord obtained an	eviction judgn	nent against you a	and do you want to stay in your	
			Go to line 12.				
		Yes this	. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About an E	viction Judgment ,	Against You (Form 101A) and file it with	

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Debtor 1 NICO	LE HARRIS Middle Name	Last Name		Ca	ase number (if kno	wan)
	metote realing	Last Name				
Part 3: Report Al	oout Any Busine	sses You Own as a :	Sole Propr	ietor		
2. Are you a sole p of any full- or pa	roprietor 🛂 N	o. Go to Part 4.				
business?	☐ Y	es. Name and location of	business			
A sole proprietorshi business you opera						
individual, and is no separate legal entity	ta	Name of business, if any				
a corporation, partn	ership, or	Number Street	····			
LLC. If you have more that	an one	Admiser Street				
sole proprietorship,	use a	****				
separate sheet and to this petition.	attach it					
		City			State	ZIP Code
		Check the appropriate	box to desci	ribe your busine	ess:	
		Health Care Busine	ess (as defin	ed in 11 U.S.C.	§ 101(27A))	
		☐ Single Asset Real I))
		Stockbroker (as de				,
		☐ Commodity Broker				
		None of the above			(-)/	
Bankruptcy Code are you a small be debtor? For a definition of sm	usiness Zi No	these documents do not of am not filing under Ch	exist, follow t	the procedure in	n 11 U.S.C. § 1	and federal income tax return or if i116(1)(B).
business debtor, see 11 U.S.C. § 101(51D)	au		•	m NOT a small	business debto	or according to the definition in
	☐ Yes	. I am filing under Chapte	er 11 and I ar	n a small busin	ess debtor acc	cording to the definition in the
**************************************		Bankruptcy Code.				
rt 4: Report if Yo	ou Own or Have	Any Hazardous Prop	erty or An	y Property T	hat Needs I	mmediate Attention
Do you own or hav	ve any 💋 No					
property that pose alleged to pose a t	es or is threat Yes	. What is the hazard?				
of imminent and identifiable hazard	1 4					***************************************
public health or sa			·			**************************************
Or do you own any						
property that need immediate attentio		If immediate attention i	s needed, wi	ny is it needed?	-	
For example, do you o	wn			-		
perishable goods, or li that must be fed, or a l that needs urgent repa	building					
	#·*	Where is the property?				
		and a are property?	Number	Street		
				**************************************	· · · · · · · · · · · · · · · · · · ·	
			City			State ZIP Code
						State ZIP Code

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Debtor	1	

NICOLE HARRIS

ast Name

Case number (it known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	l am not	required to	receive a	briefing	about
	credit co	ounseling be	ecause of	: •	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ļ	am r	ot	required	to	receive	а	briefing	about
•	credi	CC	unseling	b	ecause d	of:		

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes, Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and ☐ No administrative expenses 2 Yes are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do **4** 1-49 1.000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 100-199 10,001-25,000 ☐ More than 100,000 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your assets to \$50,001-\$100,000 ☐ \$10,000,001-\$50 million □ \$1.000,000,001-\$10 billion be worth? \$100,001-\$500,000 \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion to be? \$100,001-\$500,000 \$50,000,001-\$100 million □ \$10,000,000,001-\$50 billion \$500,001-\$1 million □ \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Executed on -12/11/2015 Executed on MM / DD /YYYY

Debtor 1

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Debtor 1 NICOLE HAR First Name Middle Nam	RIS ne Last Name	Case number (if known)_	Case number (if known)			
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this to proceed under Chapter 7, 11, 12, or 13 of available under each chapter for which the p the notice required by 11 U.S.C. § 342(b) an knowledge after an inquiry that the information	title 11, United States Code, ar erson is eligible. I also certify ti d, in a case in which § 707(b)(4	nd have explained the relief nat I have delivered to the debtor(s)(D) applies, certify that I have no			
	Signature of Attorney for Debtor	Date	MM / DD /YYYY			
	Printed name Firm name Number Street					
	City	State	ZIP Code			
	Contact phone	Email address				
	Bar number	State				

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Debtor 1	NIC First Nam		HARRI Iddie Name		Name		Case number (# known)		
For you if you are filing this bankruptcy without an attorney If you are represented by		The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.							
an atto	rney, you do not o file this page.			To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
				in your so property of also deny case, suc cases are	en if you plan to pay a pa chedules. If you do not list or properly claim it as ex y you a discharge of all y th as destroying or hiding or randomly audited to de	articular debt ou st a debt, the de empt, you may our debts if you g property, falsit termine if debto	chedules that you are required to file with the utside of your bankruptcy, you must list that debt ebt may not be discharged. If you do not list not be able to keep the property. The judge can do something dishonest in your bankruptcy fying records, or lying. Individual bankruptcy ors have been accurate, truthful, and complete. Id be fined and imprisoned.		
				If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.					
				Are you a conseque		ruptcy is a serio	us action with long-term financial and legal		
				☐ No ☑ Yes					
				Are you a	ware that bankruptov fra	ud is a serious	crime and that if your hankruntcy forms are		

inaccurate or incomplete, you could be fined or imprisoned?

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Signature of Debtor 2

Contact phone

Email address

Cell phone

MM / DD / YYYY

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

☐ No Yes

ZI No

Yes. Name of Person_

Signature of Debtor

Date

Contact phone

Email address

Cell phone

Official Form 101

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Debtor 1 NICOLE HARRIS First Name Middle Name Last Name		
First Name Middle Name Last Name		
Debtor 2		
(Spouse, if filing) First Name Middle Name Last Name		
United States Bankruptcy Court for the: Northern District of Illinois		
Case number	☐ Check if ti	nie ie an
(If known)	amended	
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Info		12/15
Se as complete and accurate as possible. If two married people are filing together, both are equally responsible for s information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended our original forms, you must fill out a new Summary and check the box at the top of this page. Part 1: Summarize Your Assets	supplying correct schedules after you	ı file
	Your assets	
	Value of what you o	wn
Schedule A/B: Property (Official Form 106A/B)	·	
1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>500</u>	0.00
1c. Copy line 63, Total of all property on Schedule A/B		
	\$500	0.00
Part 2: Summarize Your Liabilities		
	Your liabilities Amount you owe	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	•	. 00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	00.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ <u>C</u>	.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 20,436	.00
Your total liabilities	\$ 20,436	.00
art 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of Schedule I	\$422	.00
Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J	s 422	.00

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De	ebtor 1	NICOLE H	ARRIS Middle Name	Last Name		Case number (if known)		
P	art 4:	Answer The	se Questions	for Administrati	ive and Statistical Recor	ds		
6.	Are you	filing for ban	kruptcy under (Chapters 7, 11, or 1	13?			
	No. Y	You have noth	ing to report on t	his part of the form.	Check this box and submit this	s form to the court with your	other schedules.	
7.	What kin	d of debt do	you have?					
	Your family	debts are pri	marily consum d purpose." 11 U	er debts. Consume J.S.C. § 101(8). Fill o	r debts are those "incurred by a out lines 8-9g for statistical purp	an individual primarily for a p poses. 28 U.S.C. § 159.	personal,	
	Your this fo	debts are no	t primarily cons rt with your other	sumer debts. You h r schedules.	ave nothing to report on this pa	art of the form. Check this b	ox and submit	
8.	From the Form 122	s Statement o PA-1 Line 11; C	f Your Current I D R , Form 122B I	Monthly Income : Co Line 11; OR , Form 1	opy your total current monthly i 22C-1 Line 14.	income from Official	\$	422.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	s0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

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Debtor 1	NICOLE HAR	RIS		
	First Name	Mkfdle Name	Last Name	
Debtor 2				
Spouse, if filing)	First Name	Middle Name	Last Name	
United States (Case number	Bankruptcy Court for	the: Northern District of I	linois	

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

in each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part () Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

	es. Where is the property?	What is the property? Check all that apply.		
.1.	Street address, if available, or other description	Single-family home Duplex or multi-unit building	Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on <i>Schedule I</i>
		Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of t
		- 🔲 Land	\$	\$
		Investment property	Damas Maraka and	
	City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.	• • • • • • • • • • • • • • • • • • • •	,
		Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this it property identification number:	em, such as local	
		property identification indiriper.		
ou	own or have more than one, list here:			
ou	own or have more than one, list here:	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
ои 2.		What is the property? Check all that apply. Single-family home	Do not deduct secured cla	d claims on Schedule D
	own or have more than one, list here: Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured da the amount of any secure Creditors Who Have Clain	d claims on Schedule D ns Secured by Property.
		What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	Do not deduct secured de the amount of any secure Creditors Who Have Clain Current value of the	d claims on Schedule D ns Secured by Property. Current value of th
		What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	Do not deduct secured da the amount of any secure Creditors Who Have Clain	d claims on Schedule D ns Secured by Property. Current value of the portion you own?
		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured de the amount of any secure Creditors Who Have Clain	d claims on Schedule D ns Secured by Property. Current value of th
	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D ns Secured by Property. Current value of th portion you own? \$
		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured and secured as fee secured and sec	d claims on Schedule D ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by
	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D ns Secured by Property Current value of the portion you own? \$ If your ownership simple, tenancy by
	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured and secured as fee secured and sec	d claims on Schedule D ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by
	Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured and secured as fee secured and sec	d claims on Schedule D ns Secured by Property Current value of the portion you own? \$ If your ownership simple, tenancy by
	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D ns Secured by Property. Current value of the portion you own? \$ if your ownership is simple, tenancy by the estate), if known.
	Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured and secured as fee secured and sec	d claims on Schedule E ns Secured by Properly Current value of t portion you own? \$ If your ownership simple, tenancy by e estate), if known.

Case 16-04878 Doc 1 Filed 02/16/16 Entered 02/16/16 14:38:11 Desc Main Document Page 12 of 57 NICOLE HARRIS Debtor 1 Case number (if known) Last Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 1.3 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land Investment property City ZIP Code State ☐ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ₩ No Yes Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see

instructions)

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At Ye	ake: odel: ear: oproximate mileage:	Who has an interest in the property? Check one.		
At Ye	odel:			
At Ye	odel:			
At Ye	ear:		Do not deduct secured of	laims or averations. I
Αţ	***************************************	Debtor 1 only	the amount of any secur	ed claims on Schedule
	proximate mileage:	Debtor 2 only	Creditors Who Have Cla	ims Secured by Prope
	proximate mileage.	Debtor 1 and Debtor 2 only	Current value of the	
	baning me	At least one of the debtors and another	entire property?	portion you ow
	ther information:	Charles to the contract of the	¢.	
L		Check if this is community property (see instructions)	Ψ	\$
Ma	ake:	Who has an interest in the property? Check one.	Do not deduct secured d	gime or everentions. F
Mo	odel:	Debtor 1 only	the amount of any secure	ed claims on Schedule
٧e	ar:	Debtor 2 only	Creditors Who Have Clai	ms Secured by Prope
	W	Debtor 1 and Debtor 2 only	Current value of the	Current value of
	proximate mileage:	At least one of the debtors and another	entire property?	portion you owr
Otl	her information:	,	_	
1		☐ Check if this is community property (see	\$	\$
		instructions)		
Yes				
Mal	ke:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. D
Mor	del:	Debtor 1 only	the amount of any secured	daims on Schedule
Yea	RF.	Debtor 2 only	Creditors Who Have Claim	is Secured by Propert
Oth	er information:	Debtor 1 and Debtor 2 only	Current value of the	Current value of
		At least one of the debtors and another	entire property?	portion you own
3				paraon jou oun
		☐ Check if this is community property (see instructions)	\$	\$
V		☐ Check if this is community property (see instructions)	\$	\$
ı own	or have more than one, list he	instructions) ere:	\$	\$
I own Mak		instructions) ere: Who has an interest in the property? Check one.	Do not deduct secured claim	\$
	e:	instructions) ere: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claim the amount of any secured	ms or exemptions. Pu
Mak	e:	instructions) ere: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim	ms or exemptions. Puclaims on Schedule Is Secured by Property
Mak Mod Year	lei:	instructions) ere: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured claiment the amount of any secured Creditors Who Have Claiment Current value of the	ms or exemptions. Puclaims on Schedule Les Secured by Property
Mak Mod Year	e:	instructions) ere: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claiment the amount of any secured Creditors Who Have Claiment Current value of the	ms or exemptions. Pu claims on Schedule L s Secured by Property Current value of t
Mak Mod Year	lei:	instructions) Pere: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property?	ms or exemptions. Pu claims on Schedule E s Secured by Property Current value of t portion you own?
Mak Mod Year	lei:	instructions) Bre: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property?	ms or exemptions. Pu claims on Schedule L s Secured by Property Current value of t
Mak Mod Year	lei:	instructions) Pere: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property?	ms or exemptions. Pu claims on Schedule L s Secured by Property Current value of t portion you own?
Mak Mod Year	lei:	instructions) Bre: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property?	ms or exemptions. Puclaims on Schedule Less Secured by Property Current value of a portion you own?

Debtor 1

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Debtor 1

NICOLE HARRIS
First Name Middle Name

ICIO

Case number (it known)____

	you own or have any	legal or equitable interest in any of the following items?	portion yo Do not dedu	ct secured claims
6.	Household goods and	f furnishings	or exemption	1S.
	Examples: Major applia	inces, furniture, linens, china, kitchenware		
	□ No		**************************************	
i	2 Yes. Describe	USED	\$	100.00
7 1	Electronics			······································
	Examples: Televisions	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	⊒ No			
1	2 Yes. Describe	:	\$	150.00
8. C	ollectibles of value	\$		
E	xamples: Antiques an	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe		_	
		t. De la companya de la	.	
E	and kayaks; No	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
L	Yes. Describe		\$	
10 E	rearms		·	
E	xamples: Pistols, rifles	shotguns, ammunition, and related equipment		
	Yes. Describe		s	
1. CI	othes		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
E	xamples: Everyday do No	hes, furs, leather coats, designer wear, shoes, accessories		
Z	Yes. Describe	USED	\$	250.00
2. Je	weiry			
	goid, silvei	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
- A	No Yes. Describe		\$	
	n-farm animals	· · · · · · · · · · · · · · · · · · ·		
 3. № 0	n-farm animals amples: Dogs, cats, bi	ds, horses		
3. No <i>Ex</i>				
3. No Ex	amples: Dogs, cats, bi			
3. No Ex	amples: Dogs, cats, bi No Yes. Describe		\$	
B. No Ex 21	amples: Dogs, cats, bi No Yes. Describe y other personal and		\$	
3. No Ex 21 0	amples: Dogs, cats, bi No Yes. Describe y other personal and No		\$	
3. No Ex 21 0	amples: Dogs, cats, bi No Yes. Describe y other personal and No Yes. Give specific		\$\$	

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Debtor 1

NICOLE HARRIS

~~	LING WILL		
st Name	Middle Name	Last Name	

Case number (if known)

Do you own or have an	ny legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash				
Examples: Money yo	u have in your wallet, in your ho	ne, in a safe deposit box, and on hand when you file y	our petition	
☑ No				
☐ Yes		Cas	sh:	
		Cas	iff	\$
17. Deposits of money Examples: Checking, and other	savings, or other financial acco	unts; certificates of deposit; shares in credit unions, broutliple accounts with the same institution, list each.	okerage houses,	
☑ No				
☐ Yes		Institution name:		
	17.1. Checking account:			\$
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:	MARKET TO THE PROPERTY OF THE		\$
	17.9. Other infancial account.			\$
	, or publicly traded stocks , investment accounts with broke	erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
				_
				\$
				\$
				\$
 Non-publicly traded s an LLC, partnership, 	tock and interests in incorpor and joint venture	ated and unincorporated businesses, including an	interest in	
Ø No	Name of entity:	% of	ownership:	
Yes. Give specific information about		0%		S
them		0%		
		<u> </u>		B

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Debtor 1	NICOLE H		Coca number	
	First Name	Middle Name	Last Name Case number (# knawn)	**************************************
20. Governi	ment and corp	oorate bonds and o	ther negotiable and non-negotiable instruments	
Negotial	ole instruments	include personal ch	ecks, cashiers' checks, promissory notes, and money orders	
ivon-neg	iotiable instrum	ents are those you o	annot transfer to someone by signing or delivering them.	
Ø No				
	Give specific nation about	Issuer name:		
				\$
				\$
				\$
	ent or pension		4048A 4008A 4540	
Z No	o. micreoto in i	IVA, EINISA, Neugii,	401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes.	List each			
		Type of account:	Institution name:	
		401(k) or similar plan	:	\$
		Pension plan:		\$
		IRA:		
		Retirement account:		\$
		Keogh;		\$
		Additional account:		\$
				\$
		Additional account:		\$
Your shar Examples	deposits and presents of all unused of all u	deposits you have r	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications	
No				
Yes		In	stitution name or individual:	
		Electric:		\$
		Gas:		\$
		Heating oil:		\$
		Security deposit on re-	ntal unit:	\$
		Prepaid rent:		\$
		Telephone:		\$
		Water:		\$
		Rented furniture:		\$
		Other:		
				\$
3. Annuities	(A contract for	a periodic payment	of money to you, either for life or for a number of years)	
☑ No		- -		
Yes		Issuer name and des	cription:	
			,	\$
				Φ

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Debtor 1	NICOLE HARRI			_ Case numb	€ľ (if knows\	
	First Name Middle I	Name	Last Name	_	VE (A NICHAI)	
24. Interest 26 U.S.0	s in an education IRA C. §§ 530(b)(1), 529A(I	I, in an ac o b), and 529	count in a qualified ABLE pro	ogram, or under a qualified	state tuition program.	
☑ No						
☐ Yes	······	Institution	name and description. Separa	ately file the records of any int	erests.11 U.S.C. § 521(c):
					14914	D
					· · · · · · · · · · · · · · · · · · ·	a
						p
exercisa	quitable or future int ble for your benefit	terests in _l	property (other than anythin	g listed in line 1), and rights	or powers	
Z No			ti Parka sama di mana amayang sa sang pilabah kadan manan masaya sa sasaya sa sasaya ka			
	Give specific nation about them					\$
26. Patents,	copyrights, tradema	rks, trade	secrets, and other intellectu	al property		
Example: No	s: Internet domain nan	nes, websit	tes, proceeds from royalties ar	d licensing agreements		
	Give specific		e de la companya del companya de la companya del companya de la co			
	nation about them					\$
27. Licenses	, franchises, and oth	er genera	l intangibles			24
Examples	s: Building permits, exc	clusive lice	nses, cooperative association	holdings, liquor licenses, prof	essional licenses	
🗹 No						
	Give specific nation about them				· · · · · · · · · · · · · · · · · · ·	\$
Money or pr	operty owed to you?	•				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refun	ds owed to you					ordina or exemplicate.
Z No	•					
	Give specific information		, m ***********************************		Federal:	t
a V	bout them, including wo ou already filed the re	vhether turns			1	P
á	nd the tax years				Local:	B
					LOVGI.	<i>p</i>
29. Family s u Examples		n alimony,	spousal support, child support	, maintenance, divorce settler	nent, property settlemer	nt
Ø No		i				
☐ Yes. @	live specific informatio)nn		•	Alimony	•
					Alimony: Maintenance:	\$
		:			Support:	\$\$
					Divorce settlement:	\$
		:			Property settlement:	\$
30. Other amo	ounts someone owes	s von			, ,	
Examples:	Unpaid wages, disabi	ility insurar	nce payments, disability benefi loans you made to someone o	ls, sick pay, vacation pay, wo	rkers' compensation,	
Ø No						
[7]	ive specific information	n				

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Debtor 1	NICOLE H		Coop	number (if known)	
	First Name	Middle Name	Last Name	(# MARWII)	
31 Interes	ts in insurance	noliciae			
			nce; health savings account (HSA); credit, homeowner	's or renter's insurance	
2 No	. ,	,,	, and a second second () would not be owner	o, or romor a modiance	
	. Name the insu	rance company	Company		
	of each policy	and list its value	Company name: Ben	neficiary:	Surrender or refund value:
					\$
					\$
					\$
32 Any into	arest in aronar	tu that ie due ver	from someone who has died		<u> </u>
If you ar	e the beneficiar	v of a living trust.	expect proceeds from a life insurance policy, or are cur	rantly antitlad to receive	
property	because some	one has died.	report proceeds from a me modulated policy, or are our	remy entitied to receive	
2 No					
Yes.	Give specific in	nformation	•]
					\$
33. Claims a	against third n	arties, whether o	not you have filed a lawsuit or made a demand for		
Example	es: Accidents, e	mployment dispute	s, insurance claims, or rights to sue	payment	
☑ No			-		
Yes.	Describe each	claim			
] s
34. Other co	ontingent and u	ınliquidated clain	s of every nature, including counterclaims of the d	lebtor and rights	
to set of	ff claims		•		
✓ No	_				· · · · · · ·
∟ Yes.	Describe each	claim			
		4.			\$
35. Any fina	ncial assets yo	ou did not already	list		
2 No		T.			
Yes.	Give specific in	formation			
		:			
36 Add the	dollar value of	all of vour ontrio	from Part 4, including any entries for pages you h		
for Part	4. Write that nu	imber here	s from Part 4, including any entries for pages you n	nave attached	

Part 5:	Describe A	ny Business-F	telated Property You Own or Have an In	nterest In. List any r	eal estate in Part 1.
37. Do you o	wn or have an	v legal or equitab	le interest in any business-related property?		
	o to Part 6.	y legal of oquitab	e merest in any positiess-related property?		
	Go to line 38.				
, , , , , ,	00 to mie 00.				
					Current value of the
					portion you own? Do not deduct secured claims
					or exemptions.
38. Accounts	receivable or	commissions yo	ı already earned		
☑ No			·		
🔲 Yes. I	Describe		**************************************		
					\$
39. Office ea	ulpment, furnis	shings, and supp			
Examples:	Business-related	computers, software,	modems, printers, copiers, fax machines, rugs, telephones, de	esks, chairs, electronic devices	
☑ No					
🔲 Yes. D	Describe	***************************************			m
	i Nation				\$

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Case number (# known)_

Fifst Name	Milodie Rame Lass i warrie		
Mashinan fivernan a	quipment, supplies you use in business, and tools of your trade		
Machinery, fixtures, ed			
Yes. Describe			
Tes. Describe			
Inventory			
☑ No			
Yes. Describe			\$
Interests in partnersh	ps or joint ventures		
No Describe		O/ of management	
Yes. Describe	Name of entity:	% of ownership:	_
	AT	%	\$
		<u> </u>	\$
		%	\$
3 Customer lists, mailin	g lists, or other compilations		
☑ No			
Yes. Do your lists	include personally identifiable information (as defined in 11 U.S.C. § 101((41A)) ?	
☐ No			***
Yes. Desc			\$

	property you did not already list		
Any business-related	property you did not already hat		
Yes. Give specific			\$
information			-
			\$
			\$
			\$
			\$
			A
			\$
5. Add the dollar value	of all of your entries from Part 5, including any entries for pages you hav	re attached	\$
	number here	·····	
Part 69 Describe A	ny Farm- and Commercial Fishing-Related Property You Own or	r Have an Interest !	n.
If you own o	r have an interest in farmland, list it in Part 1.		
		nronarty?	
	any legal or equitable interest in any farm- or commercial fishing-related	property:	
No. Go to Part 7. Yes. Go to line 47.			
Les. Go to line 47.			Current value of the
			portion you own?
			Do not deduct secured claims
7 Carra aniresta			or exemptions.
7. Farm animals	poultry, farm-raised fish		
	yung, tami talacu liati		
☑ No ☐ Yes			100%
— 105			
			\$

NICOLE HARRIS

Debtor 1

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Debtor 1 NICULE HARRIS First Name Middle Name Last Name		•	Case number (# known)		
48. Crops—either growing or harvested					
Ø No			11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Yes. Give specific information				\$	
49 Farm and fishing equipment, implements, machinery, fix				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
☑ No					
☐ Yes	Marianianianianianianianianianianianianiani				
	tuta a stana a compresso a compresso de comp			\$	
50. Farm and fishing supplies, chemicals, and feed					
2 No □ Yes					
!					
51. Any farm- and commercial fishing-related property you d				\$	
☑ No	•				
Yes. Give specific information			· · · · · · · · · · · · · · · · · · ·		
mornaudi				\$	
2. Add the dollar value of all of your entries from Part 6, inc	luding any entr	ries for pages	you have attached	. s	
for Part 6. Write that number here	***************************************		•••••••••••••••••••••••••••••••••••••••	·	
19 Armin di Americana					
Part 78 Describe All Property You Own or Hav	ve an Intere	st in That '	You Did Not List Abov	e	
2 Payor have other property of any bind on the					
 Do you have other property of any kind you did not alread Examples: Season tickets, country club membership 	dy list?				
☑ No					
Yes. Give specific information			¥	\$	
			The same and the s	\$	71-74H-177-1
				\$	
4. Add the dollar value of all of your entries from Part 7. Writ	le that number	here	-	\$	
			_		
art 8: List the Totals of Each Part of this Fo					
List the Totals of Lacit Part of this Pol	[1 1 1 1				
. Part 1: Total real estate, line 2	**********	/		▶ \$	
6. Part 2: Total vehicles, line 5	\$	0.00			
•	Ψ <u></u>	500.00			
7. Part 3: Total personal and household items, line 15	\$	····			
3. Part 4: Total financial assets, line 36	\$	0.00			
2. Part 5: Total business-related property, line 45	\$	0.00			
). Part 6: Total farm- and fishing-related property, line 52	ς.	0.00			
- · · · ·	Ψ				
. Part 7: Total other property not listed, line 54	+ \$	0.00			
2. Total personal property. Add lines 56 through 61	\$	500.00	Copy personal property total	* * \$	500.00
-			A to a common be about a country	Ψ	
. Total of all property on Schedule A/B. Add line 55 + line 62					500.00
······································					550.00

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Fill in this information to identify your case			
Debtor 1 NICOLE HARRIS First Name Middle Na	ma Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Na			
United States Bankruptcy Court for the: Northern D			
Case number (If known)	10-71-10-17-11-10-11-10-1-1-1-1-1-1-1-1-		☐ Check if this is an
			amended filing
Official Form 106C			
Schedule C: The Pro	perty You	Claim as Exemp	12/15
Be as complete and accurate as possible. If two Using the property you listed on Schedule A/B: A space is needed, fill out and attach to this page a your name and case number (if known).	Property (Official Form 106.	A/B) as your source, list the property that	you claim as exempt. If more
For each item of property you claim as exemy specific dollar amount as exempt. Alternative of any applicable statutory limit. Some exemy retirement funds—may be unlimited in dollar limits the exemption to a particular dollar amound be limited to the applicable statutory a	ely, you may claim the ful otions—such as those fo amount. However, if you ount and the value of the	I fair market value of the property bein r health alds, rights to receive certain I claim an exemption of 100% of fair ma	g exempted up to the amount penefits, and tax-exempt orket value under a law that
Part le Identify the Property You Cla			
You are claiming state and federal nonb You are claiming federal exemptions. 1 2. For any property you list on Schedule A/A	1 U.S.C. § 522(b)(2)		
Brief description of the property and line of Schedule A/B that lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief CLOTHES	\$ 250.00	□ \$ 250.00	
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	. \$	□ \$.	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	***************************************
Brief description:	. \$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption			
(Subject to adjustment on 4/01/16 and every	3 years after that for case	s filed on or after the date of adjustment.)	
Yes. Did you acquire the property covere	ed by the exemption within	1,215 days before you filed this case?	
☐ No ☐ Yes			

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Debtor 1

NICOLE HARRIS
First Name Middle Name

Last Name

Case number (if known)_

Additional Page

	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:		\$	Q \$	
Line from Schedule A/B	· 		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from Schedule A/B.	-		☐ 100% of fair market value, up to any applicable statutory limit	***************************************
Brief description:	MANAGEMENT AND	\$		
Line from Schedule A/B.			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u></u>	
Line from Schedule A/B:	. 		☐ 100% of fair market value, up to any applicable statutory limit	and the state of t
Brief description:	***************************************	\$		
Line from Schedule A/B:	 		☐ 100% of fair market value, up to any applicable statutory limit	***************************************
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	WA-US-AU-L
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	S	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:	No. that that its other dear them		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:	-		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	a s	
Line from Schedule A/B:	PRATE Trade of the or Assessment		100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	Se:			
Debtor 1 NICOLE HARRIS				
First Name Middle Debtor 2	Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number			_	
(If known)				if this is an
			amend	ed filing
Official Form 106D				
	s Who Have Claims Secur	t de la formación de la formac		12/15
information, if more space is needed, cop	If two married people are filing together, both are e y the Additional Page, fill it out, number the entries,	qually responsible and attach it to thi	for supplying corrects form. On the top of	t fany
additional pages, write your name and ca	se number (if known).		·	-
1. Do any creditors have claims secured t				
No. Check this box and submit this for Yes. Fill in all of the information below	m to the court with your other schedules. You have noth	ing else to report on	this form.	
res. Fill in all of the information below				
Parisin List All Secured Claims				
2 List all congress status 25 and 25 and		Column A	Column B	Column C
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.	Amount of claim	Value of collateral	Unsecured
As much as possible, list the claims in alph	nabetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion if any
2.1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name]	· ·	Ψ
Number Street				
	As of the date you file, the claim is: Check all that apply.	3		
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	•		
community debt Date debt was incurred	Last 4 digits of account number	•		
2.2	Describe the property that secures the claim:	entront mis mer kunster komonetor forgosyn og kvy yn geneg og vi	ktim titi meng ngenerat patan prongras an sesamangang sa gagtas yaga	ente es presenta en estado e premio do encuento, encuento de entre en el constituido de la constituida de la c
Creditor's Name	reactive the broberty mat secures the ciaim:	Ф	. 3	·
Number Street				
THINDS SUEEK	As of the date you file, the claim is: Check all that apply.			
	Contingent			
Chr	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number	et alta e en encara el lamon en en compos populações populações per en esta en e	gar er sin de sin d	en e
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$	mi reconser i miserii i Defini (Afri	

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NICOLE HARRIS Debtor 1 Case number (if known) First Name Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this portion Do not deduct the by 2.4, and so forth. claim value of collateral. Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Last 4 digits of account number Date debt was incurred Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent State ZiP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number ____ _ Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

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Deb	ior 1	NICOLE HARRIS First Name Middle Name	·		Case number (if known)
			Last Name	B95 - 197 - 0.3 - 1	
9889999	ant 2:	List Others to Be No			
aç ye	jency is ti ou have m	ying to collect from you f	or a debt you owe to any of the debts that	someone else, list t vou listed in Part 1.	r a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name	·			Last 4 digits of account number
	Number	Street			
	***************************************		······································		_
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name			·	Last 4 digits of account number
	Number	Street			-
					-
	City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	-
					On which line in Dani 4 did you autor the anaditus?
}	Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
					and range of doodalt liables
	Number	Street			-
					-
	City		State	ZIP Code	-
\neg					On which line in Boat 4 did
	Name	A contractivity of the second			On which line in Part 1 did you enter the creditor? Last 4 digits of account number
					Last 4 digits or account itember
	Number	Street			
	City		State	ZIP Code	
7	•		and a part of		
	Name				On which line in Part 1 did you enter the creditor?
	• -				Last 4 digits of account number
	Number	Street			•
					

City

ZIP Code

State

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Fill in this information to identify your case:				
Debtor 1 NICOLE HARRIS				
First Name Middle Name Debtor 2	Last Name			
(Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Northern Distric	ct of Illinois			
Case number (If known)				ck if this is an ended filing
				•
Official Form 106E/F				
Schedule E/F: Creditors \	Who Have Unsecured Clair	ns		12/15
A/B: Property (Official Form 106A/B) and on Sche creditors with partially secured claims that are its	,	ist executory co Official Form 1 red by Property	ontracts on S 06G). Do not	Schedule Include any

 Do any creditors have priority unsecured clair No. Go to Part 2. Yes. 	ns against you?			
2. List all of your priority unsecured claims, If a	creditor has more than one priority unsecured claim, list t	he creditor sepa	rately for eacl	n claim. For
nonpriority amounts. As much as possible, list the	If a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's nf Part 1. If more than one creditor holds a particular claim	iat claim here ar	nd show both	priority and
(For an explanation of each type of claim, see the	instructions for this form in the instruction booklet.)	* ,		
		Total claim	Priority amount	Nonpriority amount
1			amount	aniount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply	1.		
City State ZIP Code	Contingent			
Who incurred the debt? Check one.	Unliquidated			
Debtor 1 only	☐ Disputed			
Debtor 2 only	Town of DDIODITY			
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
At least one of the debtors and another	Domestic support obligations			
	Taxes and certain other debts you owe the government			
Charle 25 Abits allabas to 50 .				
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were			
Is the claim subject to offset?	Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset?	Claims for death or personal injury while you were			
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Debtor 1

NICOLE HARRIS
First Name Middle Nam Middle Name

Case number (if known)_

Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Cother. Specify Cother. Specify	s page, number th	em beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
As of the date you file, the claim is: Check all that apply. Contingent Contin		Last 4 digits of account number	\$		\$
As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed	·-······	When was the debt incurred?			
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Who incurred the debt? Check one. Debtor 1 only					
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Debtor 2 only	ck one.	T. (50.00)			
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Last 4 digits of account number \$ \$	1?				
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Disputed Disputed Disputed Disputed	toto 750 Codo				
Mo incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this claim is for a community debt Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify No Yes Total A digits of account number Sireet As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Claims for death or personal injury while you were intoxicated Other. Specify	tate ZIP Code				
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt In the claim subject to offset? No Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Other. Specify	ok one.	uspated			
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Last 4 digits of account number \$ \$ \$ mority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidat		Claims for death or personal injury white you were intoxicated			
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Last 4 digits of account number \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	f				
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Contingent Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		As of the date you file the claim is: Chack all that apply			
State ZIP Code Unliquidated Disputed Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify					
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Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify					
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	cone.				
Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		Type of PRIORITY unsecured claim:			
At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify		Domestic support obligations			
Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Other. Specify	d another	Taxes and certain other debts you owe the government			
		intoxicated		to the Contract of the Contrac	the otherwise of a county consequence of the party and p
the claim subject to offset?		Guier. Specify			
No					

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Debtor 1

NICOLE HARRIS
First Name Middle Name

Last Name

Case number (# known)_

	LIST AII OF YOUR NONPRIORITY UN				
3.	Do any creditors have nonpriority unsecured No. You have nothing to report in this part. So Yes				
4.	invisionity unsecured claim, list the creditor sena	rately for each dia	at order of the creditor who holds each claim. If a creditor ha him. For each claim listed, identify what type of claim it is. Do no n, list the other creditors in Part 3.If you have more than three no	4 10-4 -1-	t
				.	
4.1	CITY OF CHICAGO DEPT OF FINAN	^F		Tota	i claim
L	Nonpriority Creditor's Name	UE.	Last 4 digits of account number	¢	2,700.00
	PO BOX 804556		When was the debt incurred?	V	
	Number Street CHICAGO IL	60680	····		
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
			☐ Contingent		
	Who incurred the debt? Check one.		☐ Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only				
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim:		
			Student loans		
	☐ Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts		:
	□ No ·		Other. Specify	•	:
	☐ Yes				:
4.2	SECRETARY OF STATE BANKRUPTO	2)/ DED#		to a significant property pro-	2 700 00
	Nonpriority Creditor's Name	SY DEPT	Last 4 digits of account number	\$	2,700.00
	2701 S DIRKSEN PKWY		when was the debt incurred?		
	Number Street	·····			
	SPRINGFIELD IL	62723	As of the date you file, the claim is: Check all that apply.		
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		☐ Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only				
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		☐ Student loans		
	Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?		that you did not report as priority claims		
	No		Debts to pension or profit-sharing plans, and other similar debts Other. Specify		
	☐ Yes				1
4.3	et et statistische de de aus andere mitte programmer von der persone der statistische der statistische der experience en experience de statistische der der statistische der statistische der statistische der statistische der statistische der der statistische der der der der der	and the second of the second o		in an armening many	steets or comparison and an amount of
	ARNOLD SCOTT HARRIS Nonpriority Creditor's Name		Last 4 digits of account number	•	1,800.00
	111 W JACKSON		When was the debt incurred?	Φ	1,000,00
	Number Street		-		
	CHICAGO IL	60604	An of the data was 5th the state of		
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.		Contingent		
	Debtor 1 only		Unliquidated		
	Debtor 2 only		☐ Disputed		
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		Student loans		
	☐ Check if this claim is for a community debt		Student loans Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?		that you did not report as priority claims		
	□ No		Debts to pension or profit-sharing plans, and other similar debts		
	Yes		Other. Specify		

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Case number (if known)_

Debtor 1

NICOLE HARRIS
First Name Middle Nam

lame	Middle	Name	Last N

Pa	List All of Your NONPRIC	RITY U	secured Clai	ms			
3.	Do any creditors have nonpriority u						······································
	No. You have nothing to report in t	his part. S	ubmit this form to	o the court with your other schedules.			
4.	monipriority unsecured claim, list the cri	editor sepa editor holds	rately for each c	cal order of the creditor who holds each claim. If a creditor had laim. For each claim listed, identify what type of claim it is. Do not im, list the other creditors in Part 3.If you have more than three n	at line at	aima atra	a at
		1 0/1 2.			Tot	tal claim	
4.1	PEOPLES ENERGY			Last 4 digits of account number	101	•	
	Nonpriority Creditor's Name 200 E RANDOLPH			When was the debt incurred?	\$	2,22	6.00
	Number Street		***************************************				
	CHICAGO City	IL State	60601 ZIP Code	As of the date you file the slater in Obert 1991			
	Oly	State	ZIP Code	As of the date you file, the claim is: Check all that apply.			
	Who incurred the debt? Check one.			Contingent			
	Debtor 1 only			☐ Unliquidated☐ Disputed			
	Debtor 2 only			Unsputed Unsputed			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	r		☐ Student loans			
	Check if this claim is for a commu			Obligations arising out of a separation agreement or divorce			
		inity debt		that you did not report as priority claims			
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debt	\$		
	☐ No ☐ Yes			Other. Specify			
4.2			ere a same assessa same a comença e en que		on of the other process of	nese transmission	
1.2	PINNACLE CREDIT SERVICE	<u>-S</u>		Last 4 digits of account number	\$	3//	7.00
	Nonpriority Creditor's Name			When was the debt incurred?			
	PO BOX 640 Number Street						
	HOPKINS	MN	55343	As of the date you file, the claim is: Check all that apply.			
	City	State	ZIP Code				
	Who incurred the debt? Check one.			Contingent Unliquidated			
	Debtor 1 only			D Disputed			
	Debtor 2 only			- Populod			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another			Student loans			
				Obligations arising out of a separation agreement or divorce			
	Check if this claim is for a commu	nity debt		that you did not report as priority claims			
	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts			
	☐ No ☐ Yes			Other. Specify			
4.3	ti er fyllen med kannala samar en fra fyr grenn, mennen, mennen, menne fyr en symmet en men en en en sen en se De fyllen men kannala samar en fra fyr grenn, mennen, mennen, mennen fyr en e		and an experience of the exper		Carolin Sonotony ay an garaga	<	
	PROFESSIONAL CREDIT AN	AL		Last 4 digits of account number		1,242	00
	Nonpriority Creditor's Name			When was the debt incurred?	\$	1,242	.00
	PO BOX 3335 Number Street						
	MANKATO	MN	56002				
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.			
	Who incurred the debt? Check one.			☐ Contingent			
	Debtor 1 only			☐ Unliquidated			
	Debtor 1 only Debtor 2 only			☐ Disputed			
	Debtor 1 and Debtor 2 only						
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:			
				☐ Student loans			
	☐ Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce			
	Is the claim subject to offset?			that you did not report as priority claims			

☐ No

Yes

Other. Specify_

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1

NICOLE HARRIS Middle Name

Last Name

Case number (if known)___

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Your NONPRIORITY Unsecured Claims — Continuation Page

ter listing any entries on this page ਹ	, number ti	nem beginning wit	th 4.4, followed by 4.5, and so forth.	Total clain
AFNI			Last 4 digits of account number	s 754.0
Nonpriority Creditor's Name PO BOX 3097			When was the debt incurred?	
Number Street BLOOMINGTON	IL	61702	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a combatth the claim subject to offset? No Yes	State ther	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
CREDIT MANAGMENT LP Nonpriority Creditor's Name		arter Block (1 temps), de es séculités en séguine consequence en encepaire, per pres	Last 4 digits of account number	s <u>264.0</u>
4200 INTERNATIONAL			When was the debt incurred?	
Number Street CARROLLTON	TX	75007	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and anot			Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a com	munity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify	
☐ No ☐ Yes				
COMED		el de constante de la constant	Last 4 digits of account number	s_3,900.0
Nonpriority Creditor's Name	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
PO BOX 6111			When was the debt incurred?	
Number Street CAROL STREAM	IL	60197	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Untiquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and anoth	ner		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a comm	nunity debt		you did not report as priority claims	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
□ No				
Yes				

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Debtor 1

NICOLE HARRIS First Name

Case number (if known)_

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Your NONPRIORITY Unsecured Claims — Continuation Page

Last Name

		MEVCE	Last 4 digits of account number	\$ 4,500.0
COOK LAW MAGISTRATE RICHARD J DALEY CE Nonpriority Creditor's Name			When was the debt incurred?	\$ 7,000.00
50 W WASHINGTON				
Number Street CHICAGO	IL 6	60604	As of the date you file, the claim is: Check all that apply.	
ity	State ZIF	Code	Contingent	
Who incurred the debt? Check one.			Unliquidated	
			☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only			***	
Deptor 1 and Deptor 2 only At least one of the debtors and anothe	r		Student loans	
At least one of the debtots and another	•		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a comm	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			Other Specify	
□ No			1	
J Yes				
kada dalam seng kacam dagi umah mini pimaga menjada semi menembar semi mini kecam kembagangan gan pembanda semi mende	n gan ganganar sara sara sara sara sara an	gan garan ganggam pandanda nara-yang dindan anaha-in yang ti	Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
City	State ZIF	P Code	☐ Contingent	
nty			Unliquidated	
Vho incurred the debt? Check one.			☐ Disputed	
Debtor 1 only			•	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and another	er		Obligations arising out of a separation agreement or divorce that	
F1 at 1 at	فياها والماسات		you did not report as priority claims	
Check if this claim is for a comm	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?			Other. Specify	
□ No				
☐ Yes	and the second seco	eng na araban da mad sebenah dibiban bebasah bandah		and and the first or the standard as a control as
			Last 4 digits of account number	\$
Nonpriority Creditor's Name		**********	When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
City	State Z.I	P Code	Contingent	
			Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only			The of MONDBIODITY was sound alone.	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and another	er		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a comm	unity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	•		Other. Specify	
			- Onto Option	
☐ No				

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Debtor 1

NICOLE HARRIS

1000	100	4.75

First Name Middle Name Last Name Case number (if known)_

List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name			TANKE TO THE TANKE	
No complete and	0:	***************************************		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claim
·	**************************************	**************************************		Last 4 digits of account number
City		State	ZIP Code	
Vame		·		On which entry in Part 1 or Part 2 did you list the original creditor?
181116				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Vumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
·····				Claims
City		State	ZIP Code	Last 4 digits of account number
lame		e de la comunidad de demonda de demonda de la comunidad de la		On which entry in Part 1 or Part 2 dld you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
iumber	Street			Part 2: Creditors with Nonpriority Unsecured
			vant-v	Claims
ity		01	700	Last 4 digits of account number
иt y		State	ZIP Code	
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured
		***************************************		Claims
ity		State	ZIP Code	Last 4 digits of account number
ame	***************************************	***************************************	· · · · · · · · · · · · · · · · · · ·	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
ity		State	700-1-	Last 4 digits of account number
9		State	ZIP Code	
ame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
ımber	Street			Part 2: Creditors with Nonpriority Unsecured
			*** 	Claims
ly		State	ZiP Code	Last 4 digits of account number
ime				On which entry in Part 1 or Part 2 did you list the original creditor?
··				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
mber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims

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Debtor 1

NICOLE HARRIS First Name Middle Name

Last Name

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Doc 1

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$</u> 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + _{\$} 0.00
	6e. Total. Add lines 6a through 6d.	6e. s 0.00
		Total claim
Total claims	6f. Student loans	6f. \$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _{\$} 0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i. + _{\$} 20,463.00
	6j. Total. Add lines 6f through 6i.	6j. \$ 20,463.00

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Fill in this	information	to identify you	r casely and the			
Debtor		HARRIS				
Debtor 2	First Name		Middle Name	Last Name		
(Spouse If filin	g) First Name		Middle Name	Last Name	Management of the state of the	
United State	s Bankruptcy C	ourt for the: Nort	hern District of III	linois		
Case number	er					
(If known)						Check if this is a
		•			месецаалальный разря	amended filing
Official	Form 10	06G				
	······································	·	L	. 41 41 45	P.0	
scneo	we u:	Execu	ory Con	itracts and	Unexpired Leases	12/15
1. Do you No. Yes 2. List sep example	have any exc Check this bo Fill in all of the	ecutory contra ox and file this force information b	case number (if cts or unexpire orn with the cour elow even if the	t known). d leases? t with your other scheducontracts or leases are	mber the entries, and attach it to this page. On ules. You have nothing else to report on this form. listed on Schedule A/B: Property (Official Form 10 act or lease. Then state what each contract or lein the instruction booklet for more examples of expection.	06A/B).
Person	or company	with whom yo	u have the cont	ract or lease	State what the contract or lease is for	
1						
Name			······································			
Number	Street					
City		State	ZIP Code			
2						
Name				***************************************		
Number	Street					
City	•	State	ZIP Code			
Name						
HAMING						
Number	Street		······································			
City		State	ZIP Code			
Ony		Grand	Zii OUG			
Name						
Number	Street					
City		State	ZiP Code			
,		~v				
Name						
Number	Street					
City		State	7IP Code			

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NICOLE HARRIS Debtor 1 Case number (if know Last Name Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 22 Name Number Street City ZIP Code Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2_ Name Number Street City ZIP Code State 2._ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code 2.__ Name Number Street City State ZIP Code

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Fill in	this information to identify your case:	
Debto		
Debto	First Name Middle Name Last Neme	
	e, if filing) First Name Last Name Last Name	
United	States Bankruptcy Court for the: Northern District of Illinois	
Case (if know	number	
1 10 100	71)	Check if this is an
O#.	in Form 40011	amended filing
	sial Form 106H	
***************************************	edule H: Your Codebtors	12/15
are thir	ig together, both are equally responsible for supplying correct in	nay have. Be as complete and accurate as possible. If two married people formation. If more space is needed, copy the Additional Page, fill it out, age to this page. On the top of any Additional Pages, write your name and
	you have any codebtors? (If you are filing a joint case, do not list en	ther spouse as a codebtor.)
	Yes	
2. Wi	thin the last 8 years, have you lived in a community property stat	e or territory? (Community property states and territories include
	zona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Ricc	, Texas, Washington, and Wisconsin.)
	No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with your spouse.	at the time?
	□ No	a at the time;
	Yes. In which community state or territory did you live?	. Fill in the name and current address of that person.
		
	Name of your spouse, former spouse, or legal equivalent	
	Number Street	
	City State	ZIP Code
3. In (Column 1, list all of your codebtors. Do not include your spouse a	
sh	own in line 2 again as a codebtor only if that person is a guaranto	or or cosigner. Make sure you have listed the creditor on
	hedule D (Official Form 106D), Schedule E/F (Official Form 106E/I hedule E/F, or Schedule G to fill out Column 2.	F), or Schedule G (Official Form 106G). Use Schedule D,
0	shipped Many and abdain	
a	olumn 1: Your codebtor	Column 2: The creditor to whom you owe the debt
3.1		Check all schedules that apply:
	ame	Schedule D, line
		Schedule E/F, line
Ñ	umber Street	Schedule G, line
	fly State	ZIP Code
3.2		
N	ame	Schedule D, line
N	umber Street	Schedule G, line
_	ty State	
3.3	ty State	ZIP Code
	ame	Schedule D, line
,		Schedule E/F, line
N	imber Street	☐ Schedule G, line
C	y State	ZIP Code

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De	ptor 1	NICOLE HARRIS			Case number (if known)	
		First Name Middle Name	Last Name			
		Additional Page to L	ist More Codebtors			
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the del	>t
3]				Check all schedules that apply:	
	Name				Schedule D, line	
					☐ Schedule E/F, line	
	Number	Street			Schedule G, line	
	City		State	ZIP Code		
3			56.0	Z.ii Oode		
i	Name				Schedule D, line	
					☐ Schedule E/F, line	
	Number	Street			Schedule G, line	
,	City		State	ZIP Code		
3					Cabaduta D. Kar	
	Name				Schedule D, line	
	Number	Street			Schedule G, line	
	(tunios)	Succe			G Scredule G, lifte	
	City		State	ZIP Code	-	
3						
	Name		***************************************		Schedule D, line	
					Schedule E/F, line	
	Number	Street			Schedule G, line	
[]	City		State	ZIP Code	***************************************	
3	~~~~				Schedule D, line	
	Name				Schedule E/F, line	:
	Number	Street			Schedule G, line	
	City		State	ZiP Code	-	
3	Name				_ Schedule D, line	
					Schedule E/F, line	
	Number	Street			Schedule G, line	
	City		State	ZIP Code	ana.	
3			Curio	zir code		
L	Name				Schedule D, line	
					Schedule E/F, line	
	Number	Street			Schedule G, line	
3	City		State	ZIP Code		
لنسنا					Schedule D, line	
	Name				Schedule E/F, line	
	Number	Street			Schedule G, line	
					· www.controllententententententententententententente	
	City		State	ZIP Code	-	

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Fill in this information to identif	y your case:						
Debtor 1 NICOLE HARRI	S						
First Name	Middle Name	Last Name					
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name					
United States Bankruptcy Court for the	: Northern District of Illinois						
Case number					Charle	if this is:	
(If known)						amended filing	
		······································				upplement showing po	estpetition chapter 13
Official Form 106I					inco	ome as of the following	date:
Schedule I: You	- ur Incomo				ММ	/ DD / YYYY	
Be as complete and accurate as p							12/15
supplying correct information. If y if you are separated and your sposeparate sheet to this form. On the Part 1: Describe Employn	use is not filing with you, is top of any additional pag	ing jointly, and y do not include i	Our s	pouse is	living wit	h you, include informat	tion about your spouse.
Fill in your employment information.		Debtor 1				B-14	
If you have more than one job,					Haranganan kananan	Debtor 2 or non	-filing spouse
attach a separate page with information about additional employers.	Employment status	☐ Employed ☑ Not emplo	ved			☐ Employed ☐ Not employed	4
Include part-time, seasonal, or self-employed work.		r -	,			- Not employed	•
Occupation may include student or homemaker, if it applies.	Occupation				····	<u> </u>	
	Employer's name		•	****	···········		
	Employer's address						
		Number Street		· · · · · · · · · · · · · · · · · · ·		Number Street	

					·*	-	
		City	Sta	te ZIP Co	xde	City	State ZIP Code
	How long employed there	∍?				***************************************	
Part 2: Give Details About	Monthly Income						
Estimate monthly income as of spouse unless you are separated.	the date you file this form.	. If you have noth	ing to	report for	any line, v	vrite \$0 in the space. Inc	lude your non-filing
If you or your non-filing spouse hat below. If you need more space, at	ve more than one employer, tach a separate sheet to this	, combine the info form.	rmati	on for all e	mployers	for that person on the lin	es
				For D	ebtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly, or the same of the s	ry, and commissions (befor alculate what the monthly w	ore all payroll vage would be.	2.	\$	0.00	\$	
3. Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+ \$	
4. Calculate gross income. Add line	e 2 + line 3.		4.	\$	0.00	\$	

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Debtor 1 NICOLE HARRIS First Name Middle Name Last Name		C	Case number (# kno	9¥n)	
		Fo	or Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$	0.00	S	
5. List all payroll deductions:		Ψ		**************************************	
5a. Tax, Medicare, and Social Security deductions	5a.	~	0.00	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	
5c. Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	
5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	
5e. Insurance	5e.	\$	0.00	\$	
5f. Domestic support obligations	5f.	\$	0.00	\$	
5g. Union dues	5g.	\$_	0.00	\$	
5h. Other deductions. Specify:	5h.	+\$	0.00	+ \$	
6. Add the payroli deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	0.00	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	
8b. Interest and dividends	8b.	•	0.00	•	
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive		Ψ		4	
include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	
8d. Unemployment compensation	8d.	\$	422.00	\$	
8e. Social Security	8e.	\$	0.00	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	æ				
Specify:	8f.	\$	0.00	\$	
8g. Pension or retirement income	8g.	\$	0.00	\$	
8h. Other monthly income. Specify:	8h.	+\$	0.00	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	422.00	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$	422.00 +	\$ 422.00	\$ 422.00
11. State all other regular contributions to the expenses that you list in Schedi	ıle J.		······································		
Include contributions from an unmarried partner, members of your household, you friends or relatives.	our de	pende			
Do not include any amounts already included in lines 2-10 or amounts that are n	ot ava	ailable	to pay expense	s listed in Schedule J.	
Specify:		******		11. +	\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain Sta	esult i etistic	s the c	ombined month	nly income.	\$422.00
13. Do you expect an increase or decrease within the year after you file this fo	rm?				Combined monthly income
№ No.		· · · · · · · · · · · · · · · · · · ·			
Yes. Explain:					

Fill in this informa	tion to identify y	our case:				
Debtor 1 NICC	LE HARRIS					
Personal Debtor 2	ne	Middle Name Last Name	Chec	k if this is:		
(Spouse, if filing) First Nar	ne	Middle Name Last Name		n amended		
United States Bankrup	tcy Court for the: N	orthern District of Illinois			t showing post of the following	petition chapter 13
Case number	*			M / DD / YYY	· · · · · · · · · · · · · · · · · · ·	g uuto.
(if known)			7411	WI / DD / TTT	T	
Official Form	106J					
Schedule	J: You	r Expenses		MMMCContinue and a second		12/15
Be as complete and information. If more (if known). Answer e	space is needed	sible. If two married people are fi , attach another sheet to this fon	ling together, both are equ n. On the top of any additi	ally respons onal pages, v	ible for supply write your nam	ing correct se and case number
Partill Descr	ibe Your House	ehold				
1. Is this a joint case	?		***************************************	***************************************		
No. Go to line Yes. Does Deb		parate household?				
□ No	·					
🚨 Yes. D	ebtor 2 must file (Official Form 106J-2, Expenses for	Separate Household of Debt	or 2.		
2. Do you have depe	ndents?	□ No				
Do not list Debtor 1 Debtor 2.		Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	#160 Stanton kommunik	Dependent's age	Does dependent live with you?
Do not state the de	endents'		SON			□ No ☑ Yes
names.			CON			□ No
			SON		·	☑ Yes
			DAUGHTER			□ No
					''''	Yes
			· · · · · · · · · · · · · · · · · · ·		····	☐ No ☐ Yes
						O No
					**************************************	Yes
 Do your expenses expenses of people yourself and your 	e other than	Ø No ☑ Yes				
Part 2: Estimate	Your Ongoing	Monthly Expenses				
Estimate your expense expenses as of a date	ses as of your ba	nkruptcy filing date unless you a uptcy is filed. If this is a supplem	re using this form as a su	pplement in a	a Chapter 13 c	ase to report
applicable date.				a wax at the	top of the form	
		ish government assistance if you			•	
		on Schedule I: Your Income (Offi	·		Your expen	ISOS Università estimatorista constanta constanta propria propria propria constanta del constanta del constanta del
any rent for the gro	und or lot.	enses for your residence. Include	first mortgage payments an	d 4.	\$	75.00
If not included in						0.00
4a. Real estate ta		and a firm		4a .	\$	0.00
	eowner's, or rente			4b.	\$	
	•	upkeep expenses		4c.	\$	0.00
4d. Homeowner's	association or co	ndominium dues		4d.	\$	0.00

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Debtor 1 NICOLE HARRIS
First Name Middle Name Last Name

Case number (if known)

			Your exp	
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	0.00
	6b. Water, sewer, garbage collection	6b.	\$	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	^ ^
7		7.	\$	250.00
8	Childcare and children's education costs	8.	\$	0.00
9	Clothing, laundry, and dry cleaning	9.	\$	
10.	Personal care products and services	10.	\$	0.00
11.	Medical and dental expenses	11.	\$	0.00
12.	The state of the s		•	0.00
	Do not include car payments.	12.	Φ	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance, Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).			
		18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	. 9 1		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1	NICOLE HARRIS	Case number (if known)	
	First Name Middle Name Last Name		**************************************
21. Other.	Specify:		
2 • • • • • • • • • • • • • • • • • •		21.	+\$0.00
22. Calcul	ate your monthly expenses.		
22a. Ad	dd lines 4 through 21.	22 a .	\$ 422.00
22b. Co	opy line 22 (monthly expenses for Debtor 2), if any, from Of	ficial Form 106J-2 22b.	\$ 422.00
22c. Ad	ld line 22a and 22b. The result is your monthly expenses.	22c.	\$422.00
			·
23. Calculat	e your monthly net income.		
23a. C	opy line 12 (your combined monthly income) from Schedule	e I. 23a.	\$422.00
23b. Co	opy your monthly expenses from line 22c above.	23b.	-\$ 422.00
23c. St	abtract your monthly expenses from your monthly income.		
TT.	e result is your monthly net income.	23c.	\$0.00
24. Do you	expect an increase or decrease in your expenses within	the year after you file this form?	
	nple, do you expect to finish paying for your car loan within e payment to increase or decrease because of a modification		
☑ No.			

Yes.

Explain here:

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				00000000000000000000000000000000000000	
Fill in this i	nformation to identify y	our case:			
Debtor 1	NICOLE HARRIS				
Debtor 2		Middle Name	Last Name		
(Spouse, if filing		Middle Name	Last Name		
	Bankruptcy Court for the: N	Northern District of III	linois		
Case number (if known)	****		**********		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Check if this is an
					amended filing
Officia	l Form 106De	С			
					
DCC!	aration At	out an i	naiviauai	Debtor's Schedule	S 12/15
If two mar	ried people are filing to	gether, both are eq	qually responsible for	supplying correct information.	
You must	file this form whenever	you file bankrupto	y schedules or amend	ded schedules. Making a false statement, c	oncealing property, or
obtaining	money or property by f both. 18 U.S.C. §§ 152, 1	raud in connection	ı with a bankruptcy ca	se can result in fines up to \$250,000, or im	prisonment for up to 20
•			•		
	Sign Below				
	pay or agree to pay so	omeone who is NO	T an attorney to help	you fill out bankruptcy forms?	
₩ No					
₩ Yes	. Name of person			Attach Bankruptcy Petition Preparer's Notice, I	Declaration, and
				Signature (Official Form 119).	
Under r	enalty of periury 1 dec	lare that I have rea	d the eumeneur and a	chedules filed with this declaration and	
that the	y are true and correct.	iare ulat i have rea	u the summary and st	chedules filed with this declaration and	
,) - 1				
× //	unto bla	HTTIO !	x		
10	re of Debtor 1	jous		4 - 0	
wig natu	to teneral t		Signature of Deb	QOF ∠	
Date 1	2/11/2015 4/ DD / YYYY		Date		
)2-16-2017	& 111d	MM/ DD /	YYYY	
C	100 DUL-10	$v \wedge v$			

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Fill	in this	information to ide	ntify your case:					
Det	otor 1	NICOLE HAR	RIS					
Det	ntor 2	First Name	Middle Name	Last Name				
) First Name	Middle Name	Last Name				
Unit	ed States	Bankruptcy Court for	the: Northern District of	of Illinois				
	e number	· · · · · · · · · · · · · · · · · · ·						
(" ^								Check if this is an
								amended filing
~ ~		-						
		Form 107						
Sta	item	ent of Fin	ancial Affai	irs for Indi	viduals Filing	for Ba	nkrupte	CV 12/15
	er (if kn	own). Answer eve	reveu, augun a seus	rate sneet to this to	ng together, both are equirm. On the top of any add	ally respon litional pag	sible for supp ges, write your	lying correct name and case
1. V	/hat is y	our current marit	al status?					
(☐ Mamie	ed .						
	Not m							
		ist all of the places	you lived in the last 3	years. Do not includ Dates Debtor 1 lived there	e where you live now. Debtor 2:			Dates Debtor 2 lived there
					Same as Debtor 1			Same as Debtor 1
	Num	ber Street	······································	From				From
	1 Tuli	311001		То	Number Street			To To
				-	***************************************		···	· • · · · · · · · · · · · · · · · · · ·
	City		State ZIP Code	_				
			orate Zir Code		City	State	ZIP Code	
					☐ Same as Debtor 1			Same as Debtor 1
	Numi	ber Street		From	****			From
	1401111	ou Street		То	Number Street			To
		***************************************	·········	•				
	City		State ZIP Code					
			Ciate Zir Coge		City	State	ZIP Code	
	thin the tes and t	last 8 years, did y territories include A	r <mark>ou ever live with a sp</mark> urizona, California, Idah	ouse or legal equiv no, Louisiana, Nevad	alent in a community pro a, New Mexico, Puerto Ric	perty state o, Texas, W	or territory? (/ashington, and	Community property Wisconsin.)
		ke sure von 60 oo	: Schedule H: Your Cod	dahtam (Office am	40050			
	, a.a. 1410	ano sure you mi OUI	. эспвише гт: Your Coc	debtors (Official Forn	1 106H).			
ant 2	Н Ехр	lain the Source	s of Your Income					
401 F-	rm 107							

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Debtor 1	NICOLE HARRIS First Name Middle Name Las	st Name	Case r	number (# known)	
lf you a	ou have any income from employme the total amount of income you receive are filing a joint case and you have income.	o irom an iods and all hus	unasses including partit	timo nativitica	endar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions ar exclusions)
Fr the	om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$	Wages, commissions, bonuses, tips	\$
Fo	or last calendar year:	Wages, commissions.		Operating a business Wages, commissions,	
	anuary 1 to December 31,	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
Fo	r the calendar year before that:	☐ Wages, commissions,		☐ Wages, commissions,	
(Ja	nuary 1 to December 31,	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
List each	oyment, and other public benefit paym g and lottery winnings. If you are filing h source and the gross income from e	a joint case and you have	income that you receive	ed together, list it only once	under Debtor 1.
☐ Yes.	Fill in the details.	Debtor 1		Debtor 2	
		Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
Fro the	om January 1 of current year until		<u> </u>		\$
	-				\$
For	· last calendar year:	\$			•
(Jar	nuary 1 to December 31,)	<u> </u>			\$\$ \$\$
For	the calendar year before that:	<u> </u>		-	æ

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Debtor 1	NICOLE HARRIS		0		
	First Name Middle Name Last No	me	Case	number (frknown)	**************************************
Part 3:	List Certain Payments You Mad	e Before You File	d for Bankruptcy		
A . A 11					
	her Debtor 1's or Debtor 2's debts pri				
∠ No	Neither Debtor 1 nor Debtor 2 has p "incurred by an individual primarily for	a personal, lattilly, or	nodsenoid purpose.		01(8) as
	During the 90 days before you filed for	bankruptcy, did you	pay any creditor a total o	f \$6,225* or more?	
	No. Go to line 7.				
	Yes. List below each creditor to wh total amount you paid that cre child support and alimony. Als	unar no normenae:	nakmante tar damaelia a	removed a bitmattana	
	* Subject to adjustment on 4/01/16 and	every 3 years after t	hat for cases filed on or	after the date of adjustment.	
☐ Yes	. Debtor 1 or Debtor 2 or both have pr				
	During the 90 days before you filed for	bankruptcy, did you p	pay any creditor a total of	\$600 or more?	
	No. Go to line 7.			, , , , , , , , , , , , , , , , , , ,	
	Yes. List below each creditor to who creditor. Do not include payme alimony. Also, do not include p	DIS IOF COMPSHE SUN	nari ahligatione quak sa	والمرافظة المرافظة المرافظة المرافظة	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name		\$	 \$	☐ Mortgage
	Storics a featile				Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP	Code			Other
	Creditor's Name		\$	\$	☐ Mortgage
	Creditor's Name				Car
					va
	Number Street				Credit card
	Number Street				Credit card
	Number Street				Loan repayment
		code			☐ Loan repayment☐ Suppliers or vendors
	VII.	ode			Loan repayment
		code	•	·	Loan repayment Suppliers or vendors Other
		code	\$	\$	Loan repayment Suppliers or vendors Other Mortgage
	City State ZIP C	ode	\$	\$	Loan repayment Suppliers or vendors Other Mortgage Car
	City State ZIP C	code	\$. \$	Loan repayment Suppliers or vendors Other Mortgage Car Credit card
	City State ZIP C	code	\$	\$	Loan repayment Suppliers or vendors Other Mortgage Car Credit card Loan repayment
	City State ZIP C	Zode	\$	\$	Loan repayment Suppliers or vendors Other Mortgage Car Credit card

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or 1	NICOLE HA	RRIS				Case number (if known	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·		Case Huttipat (it know)
inside corpo agen such	ers include your re prations of which y t, including one for as child support a	elatives; any ge ou are an offic r a business yo nd alimony,	eneral partners; er, director, per ou operate as a	relatives of any son in control, o	general partners; r owner of 20% or	partnerships of white more of their voting	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
	os. List dii paymei	ns to all alside	::.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name	***************************************	· · · · · · · · · · · · · · · · · · ·	-	\$	\$	
į	Number Street						
- č	City	State	ZIP Code				
-				··	\$	\$	
	Insider's Name Number Street			***************************************			
_		· · · · · · · · · · · · · · · · · · ·		*			
5	City	State	ZIP Code	-			
n ins iclude No	e payments on de	bts guaranteed	or cosigned by		ayments or trans	fer any property o	n account of a debt that benefi
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
În	nsider's Name		, , , , , , , , , , , , , , , , , , ,		\$	\$	
N	umber Street						
Ĉ	ity	State	ZIP Code				
ln	sider's Name			· · · · · · · · · · · · · · · · · · ·	\$. \$ <u>.</u>	
Nic	umber Street		-				
Cit	ty	State	ZIP Code				

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btor 1	NICOLE HARRIS First Name Middle Name Last N.		Case number (if known)	
	First Name Middle Name Last No	ame			
	1				
: SPECIAL SECURITY	Identify Legal Actions, Reposse				
Withir ist all	n 1 year before you filed for bankrupto such matters, including personal injury	y, were you a party in any	lawsuit, court action, or admi	nistrative proce	eding?
and co	ontract disputes.	cases, small claims actions,	divorces, collection suits, pater	nity actions, sup	port or custody modifical
ZÍ No					
	s. Fill in the details.				
		Nature of the case	Court or agency		Status of the case
С	ase title		Court Name		Pending
					On appeal
			Number Street		Concluded
¢	ase number				
			City State	e ZIP Code	
C	ase title		Court Name		
					On appeal
			Number Street		Concluded
C	ase number		City State	ZIP Code	
		Describe the proper	ty	Date	Value of the property
	Creditor's Name				\$
	Cidator s (table				
	Number Street	Explain what happe	ned		
		☐ Property was	ranneeaeead		
		Property was			
		Property was			
	City State ZIP Code	Property was	attached, seized, or levied.		
		Describe the proper	ty	Date	Value of the propert
					\$
	Creditor's Name	**************************************			
	Number Street	Explain what happen	har		
		Property was r			
		D Property was o			
	City State ZIP Code		attached, seized, or levied.		

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Describe the action the creditor took Date action was taken Describe the action the creditor took Date action was taken Normalise Sireer Last 4 digits of account number: XXXXX— Tithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of editors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions List Certain Gifts and Contributions Thin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Substitute of the details for each gift. Dates you gave the gifts Dates you gave the gifts No State 2/P Code Person's relationship to you Gifts with a total value of more than \$500 per person? No State 2/P Code Person's relationship to you Gifts with a total value of more than \$500 per person of the gifts Dates you gave the gifts Substitute of the gifts Dates you gave the gifts of total value of more than \$500 per person of the gifts Substitute of the gifts No State 2/P Code Person's relationship to you Side with a total value of more than \$500 per person of the gifts Substitute of the person of the gifts Substitute of the gifts Subst	1 NICOLE	HARRIS	•		
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Creditor's Name Number Street St					
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Describe the action the creditor took Date action was taken Amount was taken Number Street City State ZP Code Last 4 digits of account number: XXXX— Fifthin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions Ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No No No Street Street Describe the gifts Describe the gifts Dates you gave the gifts Number Street City State ZP Code Person's reliationship to you Gifts with a total value of more than \$600 per person? Number Street Same ZP Code Value the gifts Same ZP Code Same ZP Code Value the gifts Same ZP Code Same ZP Code Same ZP Code Value the gifts Same ZP Code Sam		to make a payment o	ecause you owed a debt?		
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Creditor's Name Number Street St	- res. i m in the t	uetans.			
Creditor's Name Number Street St			Describe the action the creditor took	Data action	A.m. a4
Size	Creditor's Name		<u>.</u>		Amount
City State 2IP Code Last 4 digits of account number: XXXXX—					
City State 2IP Code Last 4 digits of account number: XXXXX—	Number Street		_	e	
Last 4 digits of account number: XXXX— Last 4 digits of account number: XXXX— fithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of recitions, a court-appointed receiver, a custodian, or another official? No	0000			·	
Last 4 digits of account number: XXXX— Last 4 digits of account number: XXXX— fithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of recitions, a court-appointed receiver, a custodian, or another official? No			man.		
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Ves List Certain Gifts and Contributions thin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts Value the gifts Value the gifts Person to Whom You Gave the Gift State XIP Code Person to Whom You Gave the Gift Street Value the gifts State XIP Code Secribe the gifts Dates you gave the gifts Value the gifts Value the Street	,	appointed receiver, a c	ustodian, or another official?	or an assignee for the benefit	of
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ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift.					
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Gifts with a total value of more than \$600 per person Describe the gifts Dates you gave the gifts S		ataila far asah mis			
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Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift \$					
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City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift \$					
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City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift \$	Number Street				
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Person's relationship to you Gifts with a total value of more than \$600 per person	Ca.				
Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift \$	City	State ZIP Code	•		
Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift \$	Person's relationship	p to you			
Person to Whom You Gave the Gift Person to Whom You Gave the Gift \$					
Person to Whom You Gave the Gift Person to Whom You Gave the Gift \$	Gifts with a total va	llue of more than \$600	Describe the aifts	Max	
Person to Whom You Gave the Gift \$	per person			Dates you gave the cifts	Value
Number Street				U	
Number Street	Person to Whom You G	ave the Ciff			œ
		410 OIL			Ψ
					*
					>
	Nignior C4	······································			
City State ZIP Code	rember Street				
City State ZIP Code		1700			
	Uity	State ZIP Code			
Person's relationship to you	Person's relationshin	to vou			

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tor 1	NICOLE HARRIS	•		
	First Name Middle Name	Last Name Case number (#kno	(Mn)	
Nithi	n 2 years before you filed for han	kruntev did vov give one site		
Z N	^	kruptcy, did you give any gifts or contributions with a total v	alue of more than	\$600 to any charit
	es. Fill in the details for each gift or	oontrib. 42		
	or at at the details for each gift of	CONTRIBUTION.		
6	Gifts or contributions to charities hat total more than \$600	Describe what you contributed	Date you	Value
•	wat torst mote than \$000		contributed	value
Chi	arity's Name	w		•
U ,	and a reason			\$
		——————————————————————————————————————		•
			**************************************	Ψ
Nun	nber Street	MA Nove		
		··-		
City	State ZIP Code			
Juin-	_			
6:	List Certain Losses			
ho	scribe the property you lost and with the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
				\$
A I	lint Cautain Banna a			
	List Certain Payments or Tra			
thin 1	year before you filed for bankru	ptcy, did you or anyone else acting on your behalf pay or tra	nsfer any property	to anyone
i con	suited about seeking bankruptcy	or preparing a bankruptcy petition?	motor any property	to anyone
	,	reparers, or credit counseling agencies for services required in y	rour bankruptcy.	
No Voc	Fill in the details.			
ı U S.	riii iii trie detaiis.			
		Description and value of any property transferred	Date payment or	Amount of paymen
Perso	on Who Was Paid		transfer was made	Amount of paying
None	per Street			
1441111	ner all ags			\$
				\$
City	State ZIP Code			
Email	or website address			
Person	n Who Made the Payment, if Not You			
	som i segment, il NOL TOU			

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1	NICOLE HA	RRIS			•		
	First Name A	fiddie Name	<u> </u>	Last Name	Name Case number (if known)		
				Description and value of any pro	perty transferred	Date payment or transfer was made	Amount of payment
Pe	erson Who Was Paid		· · · · · · · · · · · · · · · · · · ·	Militaria		neutores was illette	payment
Nu	mber Street						\$
						·	\$
City		Day		•			
Onj	,	State	ZIP Code				
Em	ail or website address			·			
Per	son Who Made the Pa	yment, if I	Vot You	-			
No Yes.	Fill in the details						
				Description and value of any prop	erty transferred	Date payment or transfer was	Amount of pays
Per	son Who Was Paid			_		made	
Num	nber Street			_		·	\$
				-			\$
City		State	ZIP Code	Adding the state of the state o			
ude b not in No Yes. I	oth outright trans clude gifts and tra Fill in the details.	fers and	d transfers	ptcy, did you sell, trade, or otherway representation of the property transferred. Description and value of property transferred	ing of a security interest or	mortgage on your prop	
Perso	n Who Received Trans	sfer					
Numb	er Street						
City		Étato	ZIP Code				
	on's relationship to y						
Person	Who Received Trans	fer	····				
Numbe	er Street						
City	n's relationship to ye		ZIP Code				

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First Name Mkidle Name	Last Name	Case number (#	known)	· · · · · · · · · · · · · · · · · · ·
Within 10 years before you filed for bar are a beneficiary? (These are often called	kruptcy, did you transfer any prop	erty to a self-settled to	list of similar davias -	which
are a beneficiary? (These are often calle	d asset-protection devices.)	arry to a sem-semen ti	ner or sittligt device of	Which you
₩ No				
Yes. Fill in the details.				
	Description and value of the pro	perty transferred		Date transf
			er en	was made
Name of trust				
				
				i i
	egen entre emme en groen magnitude en			
(88) List Certain Financial Accou	nts. Instruments. Sefe Denosi	• 8 nvos		
Mithin 1 years had an an Class	; Dane Deposi	t Boxes, and Stora	je Units	
Within 1 year before you filed for bankru	iptcy, were any financial accounts	or instruments held in	Vour name or for you	honofit
nciude checking, savings, money mark	et, or other financial accounts: cer	tificates of denosity sh	aroe in hanko anadi	-1
, h, mildo, 000b	eratives, associations, and other f	nancial institutions.	ares iii Danks, Cledit Ul	Hons,
4 No				
I Yes. Fill in the details.				
	Last 4 digits of account number	.		
	Last 4 tilgits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance be
			or transferred	closing or trans
Name of Financial Institution				
	XXXX	☐ Checking		\$
Number Street		☐ Savings		
	_	Money market		
		☐ Brokerage		
City State ZIP Code	_	Other		
		Ca Ouler		
	XXXX-	m		
Name of Financial Institution		Checking	***************************************	\$
		Savings		
Number Street	•	Money market		
	-	☐ Brokerage		
		Other		
City State ZIP Code	-	Contes		
The Little Little				
you now have, or did you have within curities, cash, or other valuables?	i year before you filed for bankrup	tcy, any safe deposit b	ox or other depository	for
No				
Yes. Fill in the details.				
, to ni the uctails.				
	Who else had access to it?	Describe the	contents	Do you sti
				have it?
				□ No
Name of Financial Institution	Name	**************************************		Q Yes
				und TOS
Number Street	Number Street			
	P. G.	******		
City State ZIP Code	City State ZIP Code	8444-4		

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Debtor 1 NICOLE HARRIS			
First Name Middle Name	Last Name	Case number (# known)	
22. Have you stored property in a storage 22 No	e unit or place other than your home w	rithin 1 year before you filed for bankrup	etcy?
Yes. Fill in the details.			
	Who else has or had access to it?	Donoviho sharara	
		Describe the contents	Do you stil have it?
Name of Storage Facility	Name	-	□ No □ Yes
Number Street	Number Street	And the state of t	
	CityState ZIP Code		
City State ZIP Co	de		
 Do you hold or control any property to or hold in trust for someone. 	old or Control for Someone Else hat someone else owns? Include any p	property you borrowed from, are storing	for,
☑ No ☐ Yes. Fill in the details.			
	Where is the property?	Describe the property	Value
Owner's Name			
			\$
**	Number Of the A		
Number Street	Number Street		
	City	Code	
City State ZIP Code	e City State ZIP	Code	
City State ZIP Cod	City State ZIP	Code	
City State ZIP Code art 10: Give Details About Environmental law means any federal, hazardous or toxic substances, wastes	city State ZIP onmental Information definitions apply: state, or local statute or regulation col	ncerning pollution, contamination, relea	ses of um,
City State ZIP Code art 10: Give Details About Environmental law means any federal, hazardous or toxic substances, wastes including statutes or regulations control.	onmental Information definitions apply: state, or local statute or regulation cois, or material into the air, land, soil, sui	ncerning pollution, contamination, relea rface water, groundwater, or other medi s, wastes, or material	um,
City State ZIP Code art F10: Give Details About Environmental law means any federal, hazardous or toxic substances, wastes including statutes or regulations control Site means any location, facility, or proutilize it or used to own, operate, or util Hazardous material means anything an	onmental Information definitions apply: state, or local statute or regulation cols, or material into the air, land, soil, suicolling the cleanup of these substances perty as defined under any environme lize it, including disposal sites.	ncerning pollution, contamination, relea rface water, groundwater, or other medi s, wastes, or material. ntal law, whether you now own, operate	um, , or
Give Details About Environmental law means any federal, hazardous or toxic substances, wastes including statutes or regulations control Site means any location, facility, or proutilize it or used to own, operate, or util Hazardous material means anything an substance, hazardous material, pollutar	onmental Information definitions apply: state, or local statute or regulation cois, or material into the air, land, soil, sui oilling the cleanup of these substances perty as defined under any environme lize it, including disposal sites. environmental law defines as a hazarint, contaminant, or similar term.	ncerning pollution, contamination, relea rface water, groundwater, or other medi s, wastes, or material. ntal law, whether you now own, operate dous waste, hazardous substance, toxic	um, , or
Give Details About Environmental law means any federal, hazardous or toxic substances, wastes including statutes or regulations control Site means any location, facility, or proutilize it or used to own, operate, or util Hazardous material means anything an substance, hazardous material, pollutal port all notices, releases, and proceeding	onmental Information definitions apply: state, or local statute or regulation cois, or material into the air, land, soil, sui oilling the cleanup of these substances perty as defined under any environme lize it, including disposal sites. environmental law defines as a hazarint, contaminant, or similar term.	ncerning pollution, contamination, relea rface water, groundwater, or other medi s, wastes, or material. ntal law, whether you now own, operate dous waste, hazardous substance, toxic	um, o, or
Give Details About Environmental law means any federal, hazardous or toxic substances, wastes including statutes or regulations control site means any location, facility, or proutilize it or used to own, operate, or util Hazardous material means anything an substance, hazardous material, pollutal port all notices, releases, and proceeding that any governmental unit notified you	onmental Information definitions apply: state, or local statute or regulation cois, or material into the air, land, soil, sui oilling the cleanup of these substances perty as defined under any environme lize it, including disposal sites. environmental law defines as a hazarint, contaminant, or similar term.	ncerning pollution, contamination, relea rface water, groundwater, or other medi s, wastes, or material. ntal law, whether you now own, operate dous waste, hazardous substance, toxic	um, o, or
City State ZIP Code art 10: Give Details About Environmental law means any federal, hazardous or toxic substances, wastes including statutes or regulations control Site means any location, facility, or proutilize it or used to own, operate, or util Hazardous material means anything an substance, hazardous material, pollutation port all notices, releases, and proceeding that any governmental unit notified you	onmental Information definitions apply: state, or local statute or regulation cois, or material into the air, land, soil, sui oilling the cleanup of these substances perty as defined under any environme lize it, including disposal sites. environmental law defines as a hazarint, contaminant, or similar term.	ncerning pollution, contamination, relea rface water, groundwater, or other medi s, wastes, or material. ntal law, whether you now own, operate dous waste, hazardous substance, toxic	um, o, or
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Have you notified any governmental unit of any release of hazardous material? Solid No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of no notified on the details Governmental unit Environmental law, if you know it Date of no notified Number Street One agency Nature of the case Status of the case Status of the case Status of the case One agency Number Street One agency Number of a Number Street One agency Number Street One agency Number of a Number Street One agency Number of a Number Street One agency Number of a Number Street Number of Accountant or bookkeeper Number Street One to include Social Security number or ITIN. Number Street Number Street Number of Describe the nature of the business Street One to include Social Security number or ITIN. Number Street Number Street Number of Number of Number Street One to include Social Security number or ITIN. Number Street Number Street Number of Number of Number Street One to include Social Security number or ITIN. Number Street Number Street Number of Number of Number Street One Num	for 1 NICOLE HARRIS First Name Middle Name		Case number (if known)	
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A partner in a partnership A notificer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Describe the nature of the business Employer Identification number Describe the nature of the business Employer Identification number Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Number Street Name of accountant or bookkeeper Dates business existed	number Street	Number Street		
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A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A partner in a partnership A nomber of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership A nominer (director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Describe the nature of the business Employer identification number Do not include Social Security number or ITIN. Describe the nature of the business Employer identification number Do not include Social Security number or ITIN. Number Street Name of accountant or bookkeeper Dates business existed From		City State ZIP Code		
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Case number City State ZIP Code City State ZIP Code		Court wame		-
Give Details About Your Business or Connections to Any Business thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Business Name Number Street		Number Street	MARINE.	
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		RRIS			Coco pumbar
	First Name	Middle Name	Las	si Name	Case number (# known)
					
=				Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
5	Business Name				
Ñ	lumber Street				EIN:
				Name of accountant or bookkeeper	Dates business existed
Či	ity	State	ZIP Code		From To
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stitut	tions, creditors,	or other	parties.	ncy, ald you give a financial statement	to anyone about your business? Include all financial
No					
Yes	s. Fill in the deta	ils below			
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Debtor 1	NICOLE HARRIS			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse, if filing)	First Name	Middle Name	Last Name	
United States E Case number if known)	Bankruptcy Court for	the: Northern District of I	Ninois	

Check if this is an amended filing

12/15

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property
Creditor's	Surrender the property.	as exempt on Schedule C
name.	Retain the property and redeem it.	□ No
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	
	☐ Retain the property and redeem it.	☐ No ☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	□ No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	G res
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	□ No
Description of	Retain the property and redeem it.	☐ Yes
property securing debt:	☐ Retain the property and enter into a Reaffirmation Agreement.	_ ,00
	Retain the property and [explain]:	

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ebtor 1	NICOLE HARRIS First Name Middle Name Last N	Case number (# known)
Part 2:	List Your Unexpired Personal	roperty Leases
		you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), ite leases. Unexpired leases are leases that are still in effect; the lease period has not yet property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
	ribe your unexpired personal property le	
Lesso	r's name:	□ No
Descri proper	-	Yes
Lesso	r's name:	
		□ No
proper		☐ Yes
Lessor	's name:	□ No
Descrip propert	ption of leased ly:	Yes
Lessor'	's name:	□ No
Descrip propert	otion of leased y:	☐ Yes
Lessor's	s name:	□ No
Descrip property	tion of leased y:	Yes
Lessor's	s name:	□ No
Descript property	tion of leased /:	☐ Yes
Lessor's	s name:	□ No
	ion of leased	☐ Yes
property	• 	
t 3:	Sign Below	
nder pei ersonal	nalty of perjury, I declare that I have in property that is subject to an unexpire	licated my intention about any property of my estate that secures a debt and any
11.	colo Hannin	*
Signature	of Debtor 1	Signature of Debtor 2
	11/2015	Date
MM /	-16-16 N.H	MM / DD / YYYY